



## 2015 Shared CHNA: Summary of Findings from Surveillance Data & Stakeholders Survey

**Table 22. Priority Health Issue Successes and Challenges for Somerset County-Surveillance Data**

| Health Issues - Surveillance Data   |  |
|---|--|
| Health Successes  | Health Challenges  |
| <ul style="list-style-type: none"> <li>• Somerset has low rates of incidence of female breast cancer [SOM=105.9; ME=126.3] and melanoma per 100,000 population [SOM=17.1; ME=22.2]</li> <li>• Low diabetes long-term complication hospitalizations [SOM=47.2; ME=59.1]</li> <li>• Lower incidence of past or present hepatitis C virus (HCV) [SOM=35.2; ME=107.1], newly reported chronic hepatitis B virus (HBV) [SOM=2.0; ME=8.1] and Lyme disease per 100,000 population [SOM=33.2; ME=105.3]</li> <li>• Low chlamydia incidence per 100,000 population [SOM=230.6; U.S.=452.2]</li> <li>• Low violent crime rate per 100,000 population [SOM=108.4; U.S.=367.9]</li> <li>• Lower percentage of high school students reporting feeling sad/hopeless for two weeks in a row [SOM=22.1%; U.S.=29.9%]</li> <li>• Somerset County fares better than the state on a number of substance and alcohol use indicators, including:               <ul style="list-style-type: none"> <li>• Lower chronic heavy drinking among adults [SOM=5.7%; ME=7.3%]</li> <li>• Low emergency medical service overdose response per 100,000 population [SOM=281.5; ME=391.5]</li> <li>• Lower percentage of past-30-day alcohol use [SOM=25.1%; US=34.9%], past-30-day inhalant use [SOM=2.5%; ME=3.2%], and past-30-day nonmedical use of prescription drugs [SOM=4.1%; ME=5.6%] among high school students</li> <li>• Low substance-abuse hospital admissions per 100,000 population [SOM=240.6; ME=328.1]*</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Somerset County fares worse than the state on general health/mental health indicators:               <ul style="list-style-type: none"> <li>• More adults who rate their health fair to poor [SOM=22.1%; ME=15.6%]*</li> <li>• More adults with 14+ days lost due to poor mental health [SOM=14.9%; ME=12.4%] or poor physical health [SOM=17.1%; ME=13.1%]*</li> <li>• More adults with three or more chronic conditions [SOM=32.5%; ME=27.6%]*</li> </ul> </li> <li>• High age-adjusted mortality rate per 100,000 population [SOM=826.3; ME=745.8]*</li> <li>• High ambulatory care-sensitive condition hospital admission rate per 100,000 population [SOM=1,665.2; ME=1,499.3]*</li> <li>• Higher percentage of adults with current asthma ( [SOM=14.4%; ME=11.7%] and children with current asthma [SOM=12.1%; ME=9.1%], along with high asthma emergency department visits per 10,000 population [SOM=101.2; ME=67.3]*</li> <li>• More COPD diagnosed among adults [SOM=9.1%; ME=7.6%], high pneumonia emergency department rate [SOM=1,379.2; ME=719.9]*and high pneumonia hospitalizations per 100,000 population [SOM=380.4; ME=329.4]</li> <li>• High mortality for all cancer sites per 100,000 population [SOM=204.9; ME=185.5]*               <ul style="list-style-type: none"> <li>• Also, high levels of colorectal cancer mortality [SOM=18.8; ME=16.1], lung cancer mortality [SOM=57.6; U.S.=46.0]] and tobacco-related neoplasms mortality per 100,000 population [SOM=44.5; ME=37.4]</li> </ul> </li> <li>• Somerset fares worse than the state on a number of cardiovascular indicators, including:               <ul style="list-style-type: none"> <li>• High acute myocardial infarction hospitalizations per 10,000 population [SOM=30.4; ME=23.5]*</li> <li>• High acute myocardial infarction mortality per 100,000 population [SOM=40.1; ME=32.2]*</li> </ul> </li> </ul> |

## Health Issues - Surveillance Data

| Health Successes | Health Challenges  |
|------------------|--|
|                  | <ul style="list-style-type: none"> <li>• High coronary heart disease mortality per 100,000 population [SOM=117.4; ME=89.8]*</li> <li>• High heart failure hospitalizations per 10,000 population [SOM=28.5; ME=21.9]*</li> <li>• More hypertension prevalence [SOM=39.6%; ME=32.8%]</li> <li>• High hypertension hospitalizations per 100,000 population [SOM=36.8; ME=28.0]</li> <li>• Higher percentage of diabetes prevalence (ever been told) [SOM=11.8%; ME=9.6%] and more diabetes emergency department visits (principal diagnosis) per 100,000 population [SOM=364.7; ME=235.9]*</li> <li>• High pertussis incidence per 100,000 population [SOM=86.0; ME=41.9]</li> <li>• Despite a low violent crime rate, Somerset has more domestic assaults reports to police [SOM=774.0; ME=413.0], reported rape [SOM=46.4; ME=27.0] and suicide deaths per 100,000 population [SOM=17.7; ME=15.2] than the state</li> <li>• High traumatic brain injury related emergency department visits (all intents) [SOM=115.9; ME=81.4]* and unintentional fall related injury emergency department visits per 10,000 population [SOM=470.7; ME=361.3]*</li> <li>• Higher rates of unintentional motor vehicle traffic crash related deaths per 100,000 population [SOM=13.8; ME=10.8]</li> <li>• Higher percentage of adults who have ever had depression [SOM=26.5%; U.S.=18.7%] than the nation and more adults with current symptoms of depression than the state [SOM=13.3%; ME=10.0%]</li> <li>• Higher rate of infant deaths per 1,000 live births [SOM=7.5; ME=6.0] and fewer live births for which the mother received early and adequate prenatal care [SOM=75.5%; ME=86.4%]* Also, more live births to 15-19 year olds per 1,000 population [SOM=27.8; ME=20.5]*</li> <li>• More drug-affected baby referrals received as a percentage of all live births [SOM=12.3%; ME=7.8%]</li> <li>• High prescription Monitoring Program opioid prescriptions (days supply/pop) [SOM=9.6; ME=6.8]</li> </ul> |

*Asterisk (\*) indicates a statistically significant difference between Somerset County and Maine  
All rates are per 100,000 population unless otherwise noted*

**Table 23. Priority Health Issue Challenges and Resources for Somerset County-Stakeholder Survey Responses**

| <b>Stakeholder Input - Stakeholder Survey Responses<sup>1</sup></b>  |  |
|--|--|
| <b>Community Challenges</b>  | <b>Community Resources</b>   |
| <p>Biggest health issues in Somerset County according to stakeholders (<i>% of those rating issue as a major or critical problem in their area</i>).</p> <ul style="list-style-type: none"> <li>• Obesity (84%)</li> <li>• Drug and alcohol abuse (80%)</li> <li>• Physical activity and nutrition (75%)</li> <li>• Depression (73%)</li> <li>• Mental health (69%)</li> </ul> | <p><b>Assets Needed to Address Challenges:</b></p> <ul style="list-style-type: none"> <li>• <b>Obesity/ Physical activity and nutrition:</b> Greater access to affordable and healthy food; more programs that support low income families</li> <li>• <b>Drug and alcohol abuse:</b> Greater access to drug/alcohol treatments; greater access to substance abuse prevention programs; free or low-cost treatments for the uninsured; more substance abuse treatment providers; additional therapeutic programs</li> <li>• <b>Depression/ Mental health:</b> More mental health professionals; more community-based services; better funding and support; greater access to inpatient care; readily available information about resources; transitional programs</li> </ul> <p><b>Assets Available in County/State:</b></p> <ul style="list-style-type: none"> <li>• <b>Obesity/ Physical activity and nutrition:</b> Public gyms; farmers markets; Maine SNAP-ED Program; school nutrition programs; public walking and biking trails; Healthy Maine Partnerships; Let's Go! 5-2-1-0</li> <li>• <b>Drug and alcohol abuse:</b> Maine Alcoholics Anonymous; Substance Abuse Hotlines; Office of Substance Abuse and Mental Health Services</li> <li>• <b>Depression/ Mental health:</b> Mental health/counseling providers and programs</li> </ul> |

**Table 24. Priority Health Factor Strengths and Challenges for Somerset County-Surveillance Data**

| <b>Health Factors – Surveillance Data</b>  |  |
|--|--|
| <b>Health Factor Strengths</b>   | <b>Health Factor Challenges</b>  |
| <ul style="list-style-type: none"> <li>• More lead screening among children age 24-35 months [SOM=40.7%; ME=27.6%]*</li> </ul> | <ul style="list-style-type: none"> <li>• Somerset has a number of socioeconomic factors that are worse than state average, including: <ul style="list-style-type: none"> <li>• More adults [SOM=17.8%; ME=13.6%]* and children living in poverty [SOM=24.9%; ME=18.5%]*</li> </ul> </li> </ul> |

<sup>1</sup> Results are from the Maine Shared Community Health Needs Assessment Stakeholder Survey, conducted in May-June, 2015.

|  |   |
|--|---|
|  | <ul style="list-style-type: none"> <li>• Lower median household income [SOM=\$38,642; ME=\$48,453]*</li> <li>• Higher unemployment rate [SOM=7.9%; ME=5.7%]</li> <li>• Higher percentage of individuals who are unable to obtain or delay obtaining necessary medical care due to cost [SOM=12.6%; ME=11.0%]</li> <li>• Higher percentage uninsured [SOM=12.2%; ME=10.4%]*</li> <li>• Lower rates of lead screening among children age 12-23 months [SOM=41.1%; ME=49.2%]*</li> <li>• Fewer high school students always wear seatbelts [SOM=52.4%; ME=61.6%]*</li> <li>• Higher percentage of adults eat less than one serving of fruit per day [SOM=44.4%; ME=34.0%]*</li> <li>• Higher percentage of adults live a sedentary lifestyle – no leisure-time physical activity in past month [SOM=29.3%; ME=22.4%]*</li> <li>• Higher levels of obesity among both adults [SOM=33.8%; ME=28.9%] and high school students [SOM=16.9%; ME=12.7%]*</li> <li>• Higher percentage of current smoking among adults [SOM=26.1%; ME=20.2%] and high school students [SOM=14.9%; ME=12.9%] and more secondhand smoke exposure for high school students [SOM=46.6%; ME=38.3%]*</li> </ul> |
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*All rates are per 100,000 population unless otherwise noted*

**Table 25. Priority Health Factor Challenges and Resources for Somerset County-Stakeholder Responses**

| <b>Stakeholder Input- Stakeholder Survey Responses <sup>2</sup></b>  |   |
|--|---|
| <b>Community Challenges</b>  | <b>Community Resources</b>  |
| <p>Biggest health factors leading to poor health outcomes in Somerset County according to stakeholders (<i>% of those rating factor as a major or critical problem in their area</i>).</p> <ul style="list-style-type: none"> <li>• Poverty (81%)</li> <li>• Employment (71%)</li> <li>• Access to Oral Health (69%)</li> <li>• Transportation (68%)</li> <li>• Health literacy (67%)</li> </ul> | <p><b>Assets Needed to Address Challenges:</b></p> <ul style="list-style-type: none"> <li>• <b>Poverty:</b> Greater economic development; increased mentoring services; more skills trainings; more employment opportunities at livable wages; better transportation; better education</li> <li>• <b>Employment:</b> More job creations; more training; more employment opportunities at livable wages; greater economic development; more funding for education</li> <li>• <b>Transportation:</b> More/better transportation systems; better access to public transportation; additional funding for organizations that help with rides to medical appointments; additional resources for transportation for the elderly and disabled</li> </ul> <p><b>Assets Available in County/State:</b></p> <ul style="list-style-type: none"> <li>• <b>Poverty:</b> General Assistance; other federal, state and local programs</li> <li>• <b>Employment:</b> Adult education centers; career centers</li> <li>• <b>Health literacy:</b> Hospital systems; primary care providers; social service agencies.</li> </ul> |

<sup>2</sup> Results are from the Maine Shared Community Health Needs Assessment Stakeholder Survey, conducted in May-June, 2015.